## PATENT APPLICATION EE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

10/520900

| CLAIMS AS FILED - PART I   |  |   |  |  |              |                               |         | SMALL ENT           | TTY                    |       | OTHER                   | THAN                   |  |
|--|--|---|--|--|--------------|-------------------------------|---------|---------------------|------------------------|-------|-------------------------|------------------------|--|
|  |  |   | (Column  | (Column 1) (Column 2)  |              |                               |         | TYPE                |                        | OR    | OTHER THAN SMALL ENTITY |                        |  |
| U.S. NATIONAL STAGE FEES   |  |   | T COLUMN   | .,   |              | 00.011111 2)                  | 1       | RATE                | FEE                    | l     | RATE                    | FEE                    |  |
| BAS  | IC FEE   | , <del>, , , , , , , , , , , , , , , , , , </del> | SMALL ENT. = \$ 150                              |  | LARG         | SE ENT. = \$ 300              | 1       | BASIC FEE           |                        | OR    | BASIC FEE               | 281)                   |  |
| EXA  | MINATION FEE                                   | E   | Satisfies PCT Article 33(1)-<br>(4) = \$50/\$100 |  |              | her situations = 100 / \$ 200 | 1       | EXAM. FEE           |                        |       | EXAM. FEE               | 200                    |  |
| SEA  | RCH FEE  |   | ALL other cour                                   | S. is ISA = \$50/\$100<br>ALL other countries =<br>\$200/\$400 |              | her situations = 250 / \$ 500 | 1       | SEARCH FEE          | 1                      |       | SEARCH FEE              | 400                    |  |
| FEE  | FOR EXTRA S                                    | PEC. PGS.   | minu   | nus 100 =  |              | / 50 =                        | 1       | X \$ 125 =          |                        |       | X \$ 250 =              |                        |  |
| TOT  | AL CHARGEAB                                    | LE CLAIMS   | 15 min   | rus 20 =   | •            | 10                            |         | X \$ 25 =           |                        | OR    | X \$ 50 =               |                        |  |
| INDE   | PENDENT CL                                     | AIMS  | / mi   | inus 3 =   | . /          | B                             |         | <b>X</b> 100 =      |                        | OR    | X \$ 200 =              |                        |  |
| MUL  | TIPLE DEPEND                                   | DENT CLAIM PRI                                    | SENT   |  |              |                               | ]/      | + \$ 180 =          |                        | OR    | + \$ 360 =              |                        |  |
| * If the difference in column 1 is less than zero, enter *0* in column 2 |  |   |  |  |              |                               | TOTAL   |                     | OR                     | TOTAL | 900                     |                        |  |
| CLAIMS AS AMENDED - PART II  |  |   |  |  |              |                               |         |                     |                        | 5     | OTHER THAN              |                        |  |
|  |  | (Column 1)  |  | (Column 2) (Column 3)  |              |                               | _       | SMALL E             | NTITY                  | OR    | SMALL ENTITY            |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT         |  | HIGH<br>NUM<br>PREVIO<br>PAID                                  | BER<br>DUSLY | PRESENT<br>EXTRA              |         | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | · 15  | Minus  | " Z  | o            | <b>-</b> @                    | 1       | X \$ 25 =           |                        | OR    | X \$ 50 =               |                        |  |
|  | Independent                                    | • /   | Minus  | <del></del> ر  | >            | .0                            | 1       | X \$ 100 =          |                        | OR.   | X \$ 208 =              |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |  |              |                               |         | + \$ 180 =          |                        | OR    | + \$ 360 =              |                        |  |
|  | claims   | 1.13  | canage   | •  | TOTAL ADDIT  |                               | OR      | TOTAL ADDIT.<br>FEE |                        |       |                         |                        |  |
| 14 Indep   |  |   |  |  |              |                               |         |                     |                        |       |                         |                        |  |
|  | · · · · · · · · · · · · · · · · · · ·          | (Column 1)  |  | (Colur<br>HIGH   |              | (Column 3)                    | 1 1     |                     | <del></del>            | ) 1   |                         |                        |  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT                   |  | NUMI<br>PREVIO<br>PAID   | BER<br>DUSLY | PRESENT<br>EXTRA              |         | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | •   | Minus  | **   |              | = .                           |         | X \$ 25 =           |                        | OR    | X \$ 50 =               |                        |  |
|  | Independent                                    | •   | Minus  | ***  |              | =                             |         | X \$ 100 =          |                        | OR    | X \$ 200 =              |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |  |              |                               |         | + \$ 180 =          |                        | OR    | + \$ 360 =              |                        |  |
|  |  |   |  | . –  |              |                               |         | TOTAL ADDIT.<br>FEE |                        | OR    | TOTAL ADDIT.<br>FEE     |                        |  |
|  |  |   |  |  |              |                               |         |                     |                        |       |                         | l                      |  |
| •  |  | mn 1 is less than th<br>mber Previously Pa        |  |  |              |                               |         |                     |                        |       |                         |                        |  |
| ***  | If the "Highest Nu                             | mber Previously Pa<br>nber Previously Paid        | id For" IN THIS SP                               | ACE is les   | s than '3'   | , enter "3".                  | d in th | ne appropriate box  | c in column 1.         |       |                         |                        |  |